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FORM

D-	2
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REPORT OF CAMPAIGN CONTRIBUTIONS AND EXPENDITURES	
CHECK APPROPRIATE BOXES—PLEASE TYPE OR PRINT IN BLACK INK	

Amendment of the Report Indicated Above

Quarterly Report:	
(Check one:)	

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(Check one:)	1 st	2 nd	3 rd	4 th		
Final Report (Fund balance on Line E must be \$0)						

ALL POLITICAL COMMITTEES RETURN TO:

OCT 1 5 2021

BREFEE BLOWN

State Board of Elections Springfield Office

Full name and complete mailing address of Political Committee:

REPORTING PERIOD CASH AVAILABLE AT BEGINNING

Illinois Firefighters Political Action Fund 6404 Godfrey Rd Godfrey, IL 62035-2215

CHECK FOR ADDRESS CHANGE

COMMITTEE ID #

Committee ID: 19119 13

E-mail	add	ress
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CHECK FOR E-MAIL ADDRESS CHANGE

7/12193021 \$ 1017.33	STATE BOARD OF ELECTIONS 2329 S MacARTHUR BLVD SPRINGFIELD, IL 62704-4503 STATE BOARD OF ELECTIONS 69 W WASHINGTON ST, STE LL-08 CHICAGO, IL 60602-3026				
FROM THRU Repeat this amount in SECTION D, Line (A)					
<u>SECTION A — RECEIPTS</u>	SECTION B — EXPENDITURES				
1. Individual Contributions a. Itemized (from Schedule A): \$(1a)	6. Transfers Out a. Itemized (from Schedule B): \$ <u>350.00</u> (6a)				
b. Not-Itemized: \$(1b)	b. Not-Itemized: \$(6b)				
2. Transfers in	7. Loans Made				
a. Itemized (from Schedule A): \$(2a)	a. Itemized (from Schedule B): \$(7a)				
b. Not-Itemized: \$(2b)	b. Not-Itemized: \$(7b)				
3. Loans Received	8. Expenditures				
a. Itemized (from Schedule A): \$(3a)	a. Itemized (from Schedule B): \$(8a)				
b. Not-Itemized \$(3b)	b. Not-Itemized \$(8b)				
4. Other Receipts	9. Independent Expenditures				
a. Itemized (from Schedule A): \$(4a)	a. Itemized (from Schedule B-9): \$(9a)				
b. Not-Itemized \$(4b)	b. Not-Itemized \$(9b)				
TOTAL RECEIPTS (1a thru 4b) \$ (TR)	TOTAL EXPENDITURES (6a thru 9b)\$ 350.00 (TE)				
**************	**************************************				
5. In-Kind Contributions	<u>SECTION C — DEBTS AND OBLIGATIONS</u> (Include previously reported unpaid debts)				
a. Itemized (from Schedule I): \$(5a)	10. a. Itemized (from Schedule C): \$(10a)				
b. Not-Itemized \$(5b)	b. Not-Itemized \$(10b)				
TOTAL IN-KIND (5a + 5b) \$	TOTAL DEBTS & OBLIGATIONS \$				
**************************************	<u>SECTION D — CASH BALANCE</u>				
Name and address of person submitting this report <u>if other than</u> the committee's Chair or Treasurer:	Cash available at beginning of reporting period: \$ 1017.33 (A)				
,	Total Receipts from Section A (TR): \$(B)				
	Total cash (A) plus (B): \$ 1017.33 (C)				
	Total Expenditures from Section B (TE): $\frac{250.00}{}$ (D)				
	Funds available at close of reporting period (C minus D): \$ 767.33 (E)				
	Investments total (if applicable): \$(F)				
VERIFICATION: I DECLARE THAT THIS QUARTERLY REPORT OF CAMPAIGN CONTRIBUSTATEMENTS) HAS BEEN EXAMINED BY ME AND TO THE BEST THE BEST OF MY KNOW ARTICLE 9 OF THE ELECTION CODE. I UNDERSTAND THAT WILLFULLY FILING A FALSE C	ITIONS AND EXPENDITURES (INCLUDING ACCOMPANYING SCHEDULES AND VLEDGE AND BELIEF IS A TRUE, CORRECT AND COMPLETE REPORT AS REQUIRED BY IR INCOMPLETE STATEMENT IS SUBJECT TO A CIVIL PENALTY OF AT LEAST \$1001 AND				

SIGNATURE OF COMMITTEE TREASURER OR CANDIDATE

NAME OF POLITICAL COMMITTEE	<u>:</u> :	REPORT	ING PERIOD		FOR OFF	ICE USE ONLY
Illinois Firefighters Political Action Fund	Finnd Tilai 91.		9/30/3 THRU	21		
SCHI	EDULE	В				
EXPE	NDITUR	ES				·
CHECK THE PART OF CHECK THE PART OF PART #6 TRANSFERS OUT EXPENDITURES TO POLITI COMMITTEES - INCLUDING RAFFLE PURCHASES	CAL	PART #7	LOANS MADE	=		1
SEE PAMPHLET "	A GUIDE TO	CAMPAIGN D	ISCLOSURE	" FOR	GUIDANCE	
ITEMIZED EXPENDITURES FULL NAME, MAILING ADDRESS, AND ZIP CODE	DATE OF EXPENDITURE	PURPOSE	BENEFICIARY	EXPE RE	JNT OF EACH NDITURE THIS EPORTING PERIOD	AGGREGATE AMOUNT THIS REPORTING PERIOD
Friends to Elect Kathleen Willis	9/24/21	Donation	K.Willis	3:	50.00	250.00
	ARTS 6, 7, & 8			OTAL 1	THIS PERIOD \$	250.00
THIS FORM MAY BE REPRODUCED		PAGE	of 1			REVISED 1/1/11